## STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION

## TRAVEL EXPENSE CLAIM

FA-0302 (REV. 1/1999) Front CT #7541-0620-9

| Page | of |  |
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## PERSONAL INFORMATION NOTICE

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|-------------------------------|---------------------------------|--|----------------------------|---|-------------|---------------|----------------------------|---------------------|------------------------|---------------|-------------|---|--|-------------------|----------|---|--------------------|--|-------------|--------------|--|
|                               |                                 | 1E (First, Mi,   | -                          |   |             | -             |                            |                     |                        |               | Iso         | CIAL SECI                                   | IDITY NI IMR                                     | ED                |          |   | Tr                 | DEDARTM  | CAIT        |              |  |
|                               | . Rans                          | ic (11/31, 14/1,   | Les                        | ''                                      |             |               |                            |                     |                        |               | - 1         | SOCIAL SECURITY NUMBER<br>012-34-5678       |  |                   |          |   |                    | DEPARTMENT                                     |             |              |  |
| POSITI                        |                                 |  |                            | _                                       |             |               | B.U.                       |                     |                        |               |             | RIC DIST/UNIT (For Check to Be Sent) CONTAC |  |                   |          |   |                    | TRANSPORTATION  CT PHONE # (Include Area Code) |             |              |  |
|                               |                                 | n Engineer   |                            |   |             |               |                            | 9                   |                        |               | 59          | 59/501 (916) 5                              |  |                   |          |   |                    |  | ,           | ,            |  |
|                               |                                 | ME ADDRESS   | 3                          |   |             |               |                            |                     |                        |               |             |   | ERS ADDRES                                       |                   |          |   |                    |  |             |              |  |
| CITY                          | Main Str                        | reet   |                            |   | TA          | TE            |                            |                     | ZIP CO                 | DE            | I2:         |   | mbra Blvd.                                       |                   |          |   | STATE              | ,  | ZID COL     | \F           |  |
| Sacramento CA                 |                                 |  |                            |   |             |               | 91234-5678                 |                     |                        |               | Sacramento  |   |  |                   |          | CA                                      | ZIP CODE<br>95818- |  |             |              |  |
| (1) MONTH/YEAR (3)            |                                 |  | Т                          | (4) (5) MEALS                           |             |               |                            | T                   | (7)                    | NSPORT        | TATION      | CA  | (8)  | (9)               |          |   |                    |  |             |              |  |
| June 2<br>(2)                 | 2003 LOCATION<br>Where Expenses |  |                            |   | BREAK-      |               | O.T., L/T<br>N/C.REL<br>OR | (6)                 | (A)                    | (B)<br>TYPE   | CAF         | (C)<br>RFARE                                | PRIVA  | (D)<br>TE CAR USE | BUSINES  |   |                    |  |             |              |  |
| DATE                          | TIME                            | ME Were Incurred   |                            | ι                                       | ODGING      |               | LUNCH                      | OR<br>DINNER        | " INCIDEN-             | COST OF       | USED        |   | ILLS,<br>RKING                                   | MILES             | AMOUNT   | EXPENSE                                 | FOR DAY            |  |             |              |  |
| 10                            |                                 | 1  | ew Hire to State Service - |   |             |               |                            |                     |                        |               |             |   |  |                   |          |   | 7                  |  |             |              |  |
|                               |                                 | Actual and necessary moving expenses, not to exceed \$1000 |                            |   | 0           |               |                            |                     |                        |               |             | _   |  |                   |          | * | -                  |  |             |              |  |
|                               |                                 | expenses, in   | 01 10                      | CACCC                                   | u ş         | ,100          | ١ '                        |                     |                        |               |             |   |  |                   |          |   |                    |  |             |              |  |
|                               |                                 | Moving hou<br>fromTuscon                                   |                            |   |             | acto          | .:                         |                     |                        |               |             |   |  |                   |          |   |                    |  |             |              |  |
|                               |                                 | Truck rental   | l                          |   |             |               |                            |                     |                        |               |             |   | 875.00   |                   |          |   |                    |  |             | 875.00       |  |
|                               |                                 | Gasoline (re   | ntal                       | truck o                                 | onl         | y)            |                            |                     |                        |               |             |   | 78.50  |                   |          |   |                    |  |             | 78.50        |  |
|                               |                                 | Packing sup  | plie                       | S                                       |             | ,             |                            |                     |                        |               |             |   | 14.99  |                   |          |   |                    |  |             | 14.99        |  |
|                               |                                 |  |                            |   |             |               |                            |                     |                        |               |             |   |  |                   |          | 3                                       |                    |  |             |              |  |
|                               |                                 | One way mileage at 6 cents                                 |                            |   |             |               |                            |                     |                        |               |             |   |  |                   |          | 870                                     | 0 295.80           |  | 295.80      |              |  |
|                               |                                 |  |                            |   |             |               |                            |                     |                        |               |             |   |  |                   |          |   |                    |  |             |              |  |
|                               |                                 |  |                            |   |             |               |                            |                     |                        |               |             |   |  |                   |          |   |                    |  |             |              |  |
|                               |                                 |  |                            |   |             |               |                            |                     |                        |               |             |   |  |                   |          |   |                    |  |             |              |  |
| (10)                          |                                 |  |                            | SUBT                                    | гот         | ALS           |                            |                     |                        |               |             |   | 968.49   |                   |          |   | 870                | 295.80   |             | 1264.29      |  |
| (11) PUF<br>New I             | RPOSE OF THE<br>Hire Rela       | RIP, REMARKS<br>ocation fro                                | ona a<br>m T               | DETAI                                   | LS (        | Attac<br>Ari: | h recei<br>ZONA            | pts/vouch<br>to Sac | ers when re<br>ramente | equired)<br>O |             |   |  |                   |          | CL                                      | AIM T              | OTAL   | \$ 12       | 264.29       |  |
|                               |                                 |  | Total Control              |   | -           |               |                            |                     |                        |               |             |   |  |                   |          |   |                    |  |             |              |  |
| (12) NORMAL WORK HOURS<br>7-4 |                                 | CHOURS   | SUF-<br>FIX                | T.<br>CODE                              | M<br>O<br>D | DIST          | URCE                       | CHG<br>DIST         | EXP. AUTH              | I. SUB        | JOB         | IOB SPECIAL DES                             |  | SIGNATION FAE     |          |   | AMOUNT             |  | FY MSA CODE |              |  |
| (13) PR                       |                                 | LE LICENSE#  |                            |   |             | ##            | ###                        | ##                  | ######                 |               |             |   |  | 7                 | 022      | S                                       | 1,264.2            | 9  | 03          |              |  |
| (1.4) MII                     | 4IAM1<br>EAGE RATE              |  |                            |   |             |               |                            |                     |                        | -             |             |   |  | -                 |          | -                                       |                    |  |             |              |  |
| (14) 1111                     | 0.34                            |  |                            |   |             |               |                            | +                   |                        | -             |             |   |  | -                 |          |   |                    |  |             |              |  |
|                               |                                 |  |                            |   | H           |               |                            | +                   |                        |               |             |   |  | $\vdash$          |          | 1                                       |                    |  |             |              |  |
| PAID E                        | BY REV. FUN                     | ID CHECK #   |                            |   |             |               |                            |                     |                        |               |             |   |  |                   |          |   |                    |  |             |              |  |
| li li                         | f a privately                   | owned vehicl   | le wa                      | is used                                 | l, ar       | nd if i       | mileag                     | e rates             | exceed the             | e minimun     | n rate, I c | ertify that                                 | in accordance<br>the cost of op<br>0753, and 075 | eratin            | g the ve | ehicle wa                               | as equal           | to or great                                    | er than the | nia.<br>rate |  |
|                               | NT'S SIGN                       |  | )                          | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |             |               |                            | DATE                | 3.63                   |               |             |   | FICER APPE                                       |                   |          |   |                    |  | DATE        | 26·03        |  |
| (17) SIC                      | NATURE                          | AND TITLE O  | FAL                        | JTHOR                                   | RITY        | FO!           | R SPE                      |                     |                        | (See Iter     | n 17 on r   | everse side                                 | . <u>NOU</u>                                     | y L               |          |   |                    |  | DATE        |              |  |
|                               |                                 |  |                            |   |             |               |                            |                     |                        |               |             |   |  |                   |          |   |                    |  |             |              |  |